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APPLICANTS RON S. ISRAELI, STATEN ISLAND, NY; WARREN D.W. HESTON, NEW YORK, NY; WILLIAM R. FAIR, NEW YORK, NY;				
** CONTINUING DATA ***** This application is a CON of 08/403,803 03/17/1995 and is a CON of PCT/US93/10624 11/05/1993 which is a CIP of 07/973,337 11/05/1992 ABN				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/15/1995				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY NY	SHEETS DRAWING 48	TOTAL CLAIMS 105
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TITLE PROSTATE-SPECIFIC MEMBRANE ANTIGEN				
FILING FEE RECEIVED 1702	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	